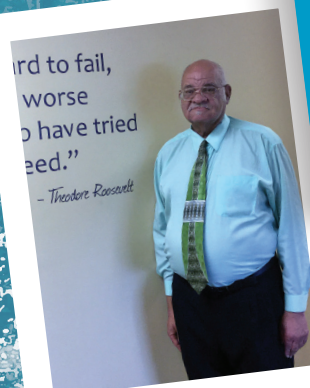


My Story Book

Personal stories and facts
illustrating the human impact of the
Coverage Gap in North Carolina

Understanding
the
North Carolina
Health Insurance

COVERAGE GAP



North Carolina's Health Insurance Coverage Gap

Individuals who fall into the Coverage Gap are between a rock and a hard place: **they do not meet the categorical or income limits to qualify for Medicaid yet they also do not make enough to afford insurance on the Marketplace.** Their jobs don't provide health insurance and no other public programs make coverage available to them.¹

In North Carolina, up to 500,000 people would benefit from closing the gap and approximately 244,000 of these individuals have no other option for affordable health insurance.²

Options for Closing the Health Insurance Coverage Gap

Closing the Coverage Gap is a provision in the Patient Protection and Affordable Care Act (ACA) that extends health insurance to individuals and families with low incomes up to 138% of the federal poverty level.

When the ACA was implemented, it intended for states to provide insurance coverage by extending their Medicaid programs to this population. Some states chose to offer coverage to this population; others did not. **North Carolina is one of 19 remaining states to take no action.**

States can choose to close the Coverage Gap one of two ways:

- **Extending traditional Medicaid to adults with incomes up to 138% of the federal poverty level, or;**
- **Developing a state-specific plan using an 1115 waiver.**

WHO IS IN THE HEALTH INSURANCE COVERAGE GAP?

Most people in the North Carolina Coverage Gap are working but employed in industries that don't often offer employer-sponsored health insurance. Industries most impacted include:³

- **Construction**
- **Food Service**
- **Sales**
- **Cleaning and Maintenance**
- **Production (e.g.: textile operators)**
- **Transportation**
- **Office and Administrative Support**
- **Personal Care and Support (e.g.: child care workers)**
- **Health Care Support (e.g.: home health aides)**

NOTE: In 2016, 138% of the federal poverty level is an annual income of \$16,394 for an individual and \$33,534 for a family of four.⁴

● Childless Households

North Carolina's current Medicaid program does not offer full coverage to adults with low incomes unless they are:

- Parents (with children under age 18 living with them)
- Pregnant
- Disabled
- Over age 65

In fact, 82% of individuals in the coverage gap are adults without dependent children.⁵ Adults who do not fit into one of the above categories are ineligible for Medicaid and many of them cannot afford to purchase insurance on the Marketplace since they do not qualify for financial help. It does not matter how low the income—there's simply no coverage for this population in North Carolina.

Kent

Construction Worker in Family-Owned Business

Kent is 41 years old and works in construction for a small, family-owned business in Lenoir County. He enjoys the work, but his health problems keep him from working full time. He works as much as he can, up to as many as 25 to 30 hours per week.

With limited income and no employer-sponsored insurance options, Kent is unable to afford a health insurance plan on the Marketplace. Kent's diabetes led to peripheral neuropathy in his feet and legs, making it difficult to work in a job requiring him to stand for long hours.

Closing the Coverage Gap would allow for approximately 27,000 diabetics to get much needed medications.⁶

Although he needs to take eight prescriptions to manage his condition, Kent sometimes delays purchasing prescriptions because he doesn't have enough money to pay for them. When Kent is sick, often due to his diabetes complications, he has to get by without an income.

Although Kent receives primary care at the Kinston Community Health Center, he is constantly worried that there will be limited availability of some of his prescriptions. And when Kent needs to visit a specialist, he must pay up front before he can even make an appointment. Sometimes he is unable to afford the

\$200 to do so and therefore can't access needed specialty care. When talking about his experience being uninsured, Kent said, "It feels like the rug can be snatched out from under me at any time."

Kent worries that being uninsured is keeping him from doing the work he wants to do. He is thankful to have a job but wishes he could work more without limitations based on his medical conditions. He thinks many people like himself are falling between the cracks in North Carolina.



● Parents with Low Incomes

North Carolina's Medicaid program only provides health insurance coverage to parents whose annual incomes are less than 45% of the federal poverty level (about \$10,000 per year for a family of three).⁷



Michelle

Mom & Small Business Owner

Michelle is 32 years old and has been uninsured for four years. She owns a hair salon and works there full-time, often working

14 hour days because she enjoys what she does. She had Medicaid when she was pregnant but lost it the year after her daughter was born.

Michelle tried to purchase health insurance on the Marketplace but could only afford dental coverage. She used that coverage to have a few dental procedures done, but she can't afford the medical insurance she really needs. The premium costs are too high because she doesn't qualify for financial help due to her low income. Michelle has four children and after paying for rent, utilities, and food, she doesn't have enough money left over to afford full-price coverage.

Michelle wants to get check-ups and annual exams to make sure she stays healthy but she's skipped these preventive services because of the high out-of-pocket costs. With health insurance coverage, Michelle would be able to take care of all of her preventive care needs.

Michelle says, "I've been lucky I haven't had a significant health problem since I've been uninsured, but that's not to say that there isn't something going on that I might not know about. I also want to be compliant with the law that

requires me to have health insurance."

If Michelle could talk with a member of the legislature, she would ask them to hear the voices of the people who are working hard and struggling to access regular, preventive care. She says, "Everyone's situation is different but we all have the same basic needs."

When parents are insured, children are more likely to be enrolled in health insurance as well.

There are many short-term and long-term benefits to children when their parents have health coverage:

- **When parents are insured, they are healthier and better able to care for their children and provide for their family.⁸**
- **With full family coverage, families are less likely to experience catastrophic medical debt that can undermine a family's ability to meet the needs of their children.⁹**
- **When parents are insured, children are more likely to be enrolled in health insurance as well.¹⁰**

● Entrepreneurs and Small Business Owners

Small businesses are the drivers of North Carolina's economy and account for nearly half of North Carolina's employees.¹²

- **Many small business owners are unable to provide themselves or**

Jerry

Small Business Manager Turned Full-Time Student and Entrepreneur

In 2009, Jerry lost his job as a purchasing manager for a small business. With a bachelor's degree in business administration, he hadn't expected his re-entry in the job market to be as difficult as it was. Unable to find work and needing health insurance, Jerry sought insurance from the Marketplace. Unfortunately, he was unable to access financial help because his income was too low, putting him in the Coverage Gap.

Determined not to be left out of the workforce long-term, Jerry decided to change career directions and enrolled as a full-time student in computer information technology. With three of his fellow classmates, he started an application development company called Extra Bits Studios. Although they are finding some initial success, Jerry still does not make enough money to move him out of the Coverage Gap.

Jerry feels his health is relatively good. However, he has diabetes, sleep apnea, and knee pain. Sleep apnea patients, whose breathing can be interrupted while sleeping, typically get a new CPAP machine every two years and a new filter once a month. However, Jerry has been using the same machine for eight years and purchases a new filter every six months. Without insurance, a new machine would cost him \$2,000.

Jerry hasn't been able to see a specialist about his knee pain because the waiting time for the specialist to see uninsured patients is too long. While waiting for care, he's hoping the problem doesn't worsen and that he won't require surgery once he finally sees a doctor.

PHOTO CREDIT: JONATHAN ROSS



56% of those in the NC Coverage Gap work for small businesses with fewer than 50 employees.¹⁴

their employees with health insurance coverage.

- In fact, 56% of those in the health insurance Coverage Gap work for small businesses with fewer than 50 employees.¹³
- Closing the Coverage Gap would provide a needed resource for small business owners and entrepreneurs and support the health of owners and employees.

● Young Adults

Young adults in North Carolina are eligible to stay on a parent's private health insurance plan until the age of 26. However, this is not an option for many young people if their parents are uninsured or if they cannot afford to pay for their portion of the insurance plan. Young adults over the age of 26 must qualify for insurance coverage on their own and many simply cannot afford it.

Kelsey

Graduate School Degree and Working Three Jobs

When we interviewed Kelsey,* she was a recent graduate with a master's degree and had been looking for a full-time job for over a year. She expected it to take time to find full-time employment, but she was struggling with being uninsured. She was working multiple contract and part-time positions in health research. While in graduate school, Kelsey had student medical coverage that enabled her to access care, but following school, she didn't qualify for Marketplace financial help.

Kelsey suffers from several health conditions that are exacerbated by her limited access to health care. Plantar fasciitis, or pain in her feet, limits Kelsey's ability to exercise and work jobs that require long hours on her feet. She also battles with depression. Kelsey says, "If Medicaid were expanded, I could get care for my feet and depression, which are both directly hindering my ability to contribute to society."

Kelsey was working three jobs, barely making ends meet. She felt lucky to have a network of people who helped support her. As a single woman with a low income and no kids, her insurance options were limited in North Carolina.

Kelsey wants policymakers to understand that they're not wasting money when they invest in preventive care for their population. She says, "We need to take action now to save money later."

** "Kelsey" is a pseudonym. Since this interview, Kelsey found full-time employment and now has employer-sponsored insurance. She is a good example how closing the Coverage Gap would enable some individuals to maintain coverage during periods when their work situation changes. It would provide important, temporary coverage during challenging life transitions.*

Closing the Coverage Gap would enable some individuals to maintain coverage during periods when their work situation changes.

● People Injured on the Job & People with Complex Health Conditions

There are many individuals in North Carolina who want to work, but have pre-existing conditions or who have experienced injuries on the job that make it difficult to maintain employment.

- **Many individuals who have suffered severe injuries or illness still cannot qualify for benefits such as Social Security disability or Supplemental Security Income.**
- **Without health insurance, it can be impossible to address the injury or condition that is preventing a person from working.**

Jacqueline & Darian Working Couple Suffering from Workplace Injury

Darian and Jacqueline support each other, even when faced with extreme challenges.

Darian was injured while working for a landscape and lawn care business five years ago. Since then, he has not been able to work and the couple has been forced to rely on Jacqueline's income. To get employer-sponsored insurance, Jacqueline would need to work more hours, which is difficult in her line of work. This leaves them both uninsured and in the Coverage Gap.

Darian's medical bills following his injury amounted to nearly \$20,000. If it hadn't been for a local charity care program, they would have faced insurmountable debt.

Jacqueline and Darian know how stressful it can be to decide if getting necessary medical care is worth the high cost when you are uninsured. Jacqueline said that her family has a history of breast cancer, but she hasn't been able to get a mammogram for more than two years.

Jacqueline and Darian said others in their community face medical debt and barriers to getting health care coverage, as well. Many of the small employers in town can't afford to offer health insurance. When asked about his experience recovering from his injuries without health care coverage, Darian said "we never once gave up."



States that closed the coverage gap experienced significant reductions in debt collections among low-income populations.¹⁶

Roosevelt

Veteran

Roosevelt is a veteran and unable to access all of the medical care he needs to address his health concerns, including those that resulted from his time in the service.

Roosevelt has suffered with chronic obstructive pulmonary disease (COPD) and sinusitis for many years. Although he has some health coverage through the Veterans Health Administration, Roosevelt does not live near a VA hospital, making it very difficult for him to seek care when he needs it.

Transportation barriers and low wages, especially in rural areas, are major challenges for veterans who can only receive care from VA facilities.

Roosevelt is an advocate for veterans and believes there needs to be more awareness about the challenges veterans face when trying to access health care, especially if they do not have another source of health insurance. Transportation barriers

and low wages, especially in rural areas, are major challenges for veterans who can only receive care from VA facilities.

Roosevelt thinks people aren't able to get care that they need when they need it. He wants policymakers to know, "I'm a human like you. I'm a citizen like you. Please do right by the people who have helped you."

"It is hard to fail,
but it is worse
never to have tried
to succeed."

- Theodore Roosevelt



● Veterans

In North Carolina, 30,000 veterans have no health care coverage, either through the Veterans Administration or other insurance.¹⁸

- North Carolina has the 5th highest rate of uninsured veterans in the country.¹⁹
- 12,000 uninsured veterans in North Carolina would benefit if North Carolina closed the Coverage Gap.²⁰
- Veterans in the Coverage Gap are concentrated in Cumberland, Onslow, Wake, Guilford, Forsyth, and Mecklenburg counties.²¹

● Older North Carolinians & People Waiting for Medicare

Thousands of North Carolinians between the ages of 50 and 64 are uninsured but don't qualify for Medicaid, Medicare, or Marketplace coverage. Medicare

William

Former IT Professional

William worked in the Information Technology field for more than 30 years. He spent many of those years working in the IT department of a regional medical center but is now unable to get the medical care that he needs.

William is in his early 60s but has been suffering from chronic and debilitating back pain since he was 35. While he was insured, William had multiple surgeries on his back to help alleviate his pain, but a series of complications left William with constant pain and unable to do activities he used to enjoy.

William hasn't been working for the last two years because his doctor thinks his work at a computer could cause further injuries to his back. William has been uninsured since he stopped working—he doesn't qualify for Medicaid or financial help in the Marketplace.

He has a difficult time getting the services he needs—not only for his back, but also for his eyes. When he was insured, William was able to see a pain specialist for his chronic back pain that allowed him to find the right combination of physical therapy and medication; now, specialists are harder to access and he has trouble getting appropriate treatment.

William has five grandchildren but is unable to play basketball with his grandson because he can't bend down to pick up the ball. He is also unable to drive long distances or pick up items that weigh more than 10 pounds—this makes him more reliant on his daughter and her family than he'd like to be.

When asked how he feels about not being able to access the care he needs, William said, "I worked all my life. Just because I can't work now doesn't mean I shouldn't be able to access health care. It's frustrating, depressing... [that] I can't get these benefits even after working for so many years."

17% of those in the Coverage Gap are between the ages of 55 and 64.²⁴

Sonya

Back to School for New Opportunities

Sonya recently decided to go back to school to get a degree in counseling so that she can help other people who may be experiencing personal challenges in various aspects of their lives. Although she hopes to dedicate her life to other people through her work, she faces her own unique set of challenges, many of them resulting from her inability to access necessary health care services.



Sonya has four children and three grandchildren. In the past, she has been insured through work or through Medicaid when she had dependent children living with her. However, now that all of her kids are grown, her options are limited. When Sonya was on Medicaid in December 2011, she was diagnosed with degenerative disc disease. Her doctors determined that she needed an extensive back surgery and since Sonya had coverage and was in so much pain, she didn't think twice about having the procedure done.

In 2012, her youngest daughter aged out of the Medicaid system and Sonya also lost access to insurance coverage, leaving her without the ability to receive the necessary physical therapy or follow-up exams. The surgeon who had done the procedure refused to continue seeing Sonya because she couldn't pay \$200 up front for each office visit.

Sonya won't be eligible for Medicare for another seven years. She doesn't know what she is going to do between now and then and worries about not being able to access preventive services. Sonya also has a family history of cancer; in fact, both of her parents died of the disease. Sonya worries that she may be at high risk for cancer but has no way of knowing if there are any problems since she can't afford the necessary screenings and tests.

Sonya wishes North Carolina's legislators could see how insurance access can actually help people reclaim their lives. She says, "I am taking the right steps; I'm going back to school. We need to stop getting death sentences because we couldn't access preventive services."

health insurance is available to most people who:

- **are over age 65;**
- **have been entitled to Social Security Disability benefits for 24 months;**
- **have amyotrophic lateral sclerosis (ALS) better known as Lou Gehrig's Disease²² or end-stage renal disease.²³**

Many people who do not meet the Medicare age or disability requirements are also unable to access Medicaid, leaving them unable to get the care they need as they grow older or sicker. This puts more strain on Medicare since these people often enter the system in poorer health.

● People Trying to Find Work in a Challenging Economy

North Carolina's economic transformation—which has resulted in more low-wage

and high-wage jobs but little in between—has only been made worse after the Great Recession.

- The lack of jobs to match the growing workforce has held wages down and hit rural areas the hardest. At the same time, without jobs that provide career pathways and benefits like health care many who work still struggle to make ends meet.
- In an effort to improve their chances at finding a stable career path, some North Carolinians are going back to school for additional degrees and certifications.
- During this process, many do not have access to employer-sponsored insurance and cannot afford Marketplace plans. Thus, they often fall in the Coverage Gap.

● Caretakers

Homecare workers provide crucial healthcare services that allow

Dorothy

Home Health Aide

Dorothy is worried that her health problems will affect her ability to work as a home health aide.

Dorothy has been uninsured for her entire life. Qualifying for Medicaid has never been possible because she doesn't have kids and doesn't qualify for Medicare due to her age.

Dorothy says that being uninsured is becoming more of an issue as she gets older. She suffers from poor eyesight and chronic headaches. The specialty care she needs to address these challenges is not available at the health center where she receives her primary care services.

Dorothy makes an effort to eat nutritious foods and exercise regularly, but those things alone can't solve all of her health care challenges. For example, Dorothy has not been able to see a doctor about problems she has with one of her eyes.

In addition to her headaches and eye problems, Dorothy also has pain and numbness in her hands, pain in her right foot, and pain in her right hip. These health issues all impact her ability to work. Dorothy used to cook for her church community but can no longer do so because of pain in her feet. She is also worried that the pain in her hands will start to affect her ability to sew, something she likes to do to take her mind off other problems.

Dorothy said having health insurance would be wonderful so that she could finally determine what is causing some of her health issues. She is committed to taking care of herself and wants to be able to access the care she needs to make sure she is healthy.



Dorothy makes an effort to eat nutritious foods and exercise regularly, but those things alone can't solve all of her health care challenges.

Mary

Caretaker of the Mentally and Physically Disabled

Mary loves helping people and has cared for people who have mental and physical disabilities for more than 10 years. She works in a family care home, helping a group of adults with daily living skills—teaching them how to bathe, interact with others, and behave appropriately in public. It makes her feel good to help people with social and daily living skills, and she really likes the clients with whom she works. Mary works 11-hour shifts and as many days as she can.



Unfortunately, Mary's employer doesn't offer health insurance. She's been a patient at her local Federally Qualified Health Center for 10 years. When she first began as a patient there, Mary had insurance through her husband's job. When they divorced, she lost access to her husband's insurance.

As Mary explained, "The insurance I had through my husband was very good. I could get any care I needed. But when you don't have an insurance card to show, you get the minimum. Period."

Mary is fortunate she can continue receiving her primary care on a sliding fee at the health center; however, she knows she needs certain screenings that she just can't afford without insurance. In the meantime, she tries to take care of herself by eating vegetables and drinking water, and taking medication to manage her blood pressure and knee pain.

Mary raised three children and is blessed with 12 grandchildren. She continues to care for others through her work in the family care home, and yet, when it comes to her own needs, she doesn't have the resources to care for herself as she should.

In her own words, "Because of my age, my educational level, and where I live, it's not easy to get a job that offers health insurance. Health insurance is sky-high in the rural area where we live, and if we don't pay rent, then we are out on the street. There are no jobs in this community where you can make enough money to live a decent life which includes buying and paying for your own insurance."

Mary tried to access insurance coverage through the Marketplace. She qualified for coverage, but when she called to find out about financial help to pay for the plans, she recalls, "The woman on the phone told me North Carolina doesn't support Affordable Care Act plans for people with low incomes like mine. I was shocked. It was a big slap in our face[s] because some of us were really counting on insurance through the Federal Marketplace."

"There are no jobs in this community where you can make enough money to live a decent life which includes buying and paying for your own insurance."

seniors to age with dignity in their own homes.

- Homecare workers earn just \$8-\$9 an hour, well below the state's median wage of \$15.91 and even farther below what it takes to make ends meet.
- Additionally, too many home healthcare workers lack access to affordable health insurance. In North Carolina, there are approximately 16,000 health care support professionals who are caught in the Coverage Gap.²⁵ ■

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Want to Know More about the Health Insurance Coverage Gap or How to Support the Policy Efforts?

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